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B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

## 8. Name and address of Business (including trade name, if any).

Name Blitman and King LLP

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 443 North Franklin St. Suite 300

City Syracuse

State New York ZIP Code + 4 13204-1415

## 9. Business deals with:

☐ a. Labor Organization☒ b. Trust☐ c. Employer

## 10. If 9.b. or 9.c. is checked give trust or employer's name.

Name Sheet Metal Workers Local46 Health &amp; Annuity

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 40 Rutter Street

City Rochester

State New York ZIP Code + 4 14606

## 11.a. Nature of such dealing.

Legal Counsel for the Health and Annuity Funds

## 11.b. Approximate dollar value of such dealing.

## 12.a. Nature of interest held or income received.

6/14/04 Erisa Educational Seminar with Golf

## 12.b. Amount.

\$55

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

## 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name None

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

## 14.a. Nature of payment.

13.b. Is the Business an Employer ☐ or Consultant ☐ ?

## 14.b. Amount of payment.

Name of Person Filing Joseph Leone

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name Manning and Napier Advisors

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 290 Woodcliff Drive

City Rochester

State New York ZIP Code + 4 14450

9. Business deals with:

☐ a. Labor Organization

☒ b. Trust

☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name Sheet Metal Workers LU#46 Health & Pension

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 40 Rutter Street

City Rochester

State New York ZIP Code + 4 14606

11.a. Nature of such dealing.

Investment Manager

11.b. Approximate dollar value of such dealing.

12.a. Nature of interest held or income received.

8/17/04 Lunch with Golf

12.b. Amount.

\$65

## Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

## 8. Name and address of Business (including trade name, if any).

Name Lipsitz, Green, Fahringer, Roll, Salisbury, Cambr

Trade Name, if any: ia, LLP

P.O. Box, Bldg., Room No., if any

Street 42 Delaware Ave, Suite 300

City Buffalo

State New York ZIP Code + 4 14202

## 9. Business deals with:

☒ a. Labor Organization☐ b. Trust☐ c. Employer

## 10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

## 11.a. Nature of such dealing.

Attorney

## 11.b. Approximate dollar value of such dealing.

## 12.a. Nature of interest held or income received.

11/18/04 Dinner Meeting

## 12.b. Amount.

\$45